

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0018 Abraham Lincoln Memorial Hospital		New Location		Lincoln IL 62656-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	22	0	22	#08-074 - Discontinue 19 M/S, M/S = 22
PEDIATRIC	0	0	0	#08-074- Discontinue 4 Ped beds
OBSTETRIC-GYNECOLOGY	3	0	3	#08-074 - Discontinue 8 OB. OB=3
INTENSIVE CARE	0	0	0	#08-074 - Discontinue ICU
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	25	#08-074 Board authorized 25 bed replacement hospital at new location

NOTES

On Jan 2009, #08-074 Board approved a replacement hospital at new location with M/S = 22 and OB = 3.

00189 Abraham Lincoln Memorial Hospital		315 8th Street		Lincoln IL 62656-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	0	0	0	Board to reduce 41 beds (66-41 = 25)

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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9999 Adventist Bolingbrook Hospital

400 Medical Center Dr

Bolingbrook, IL 60440

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	106	0	106	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	138	0	138	
				#03-095, Board approved the permit to establish the hospital

NOTES

#03-095, Board approved the permit to establish the hospital. Hospital opened in 2008.

3814 Adventist GlenOaks Hospital

701 Winthrop Avenue

Glendale Height, IL 60139-9972

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	103	42	61	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	15	0	15	
INTENSIVE CARE	10	0	10	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	58	0	58	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	186	42	144	
				Board to reduce 42 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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0976 Adventist Hinsdale Hospital 120 North Oak Street Hinsdale, IL 60521-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	197	0	197	
PEDIATRIC	24	5	19	
OBSTETRIC-GYNECOLOGY	37	0	37	
INTENSIVE CARE	31	0	31	
NEONATAL INTENSIVE CARE	11	0	11	
ACUTE/CHRONIC MENTAL ILLNES	22	5	17	
REHABILITATION	32	6	26	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	354	16	338	
				Board to reduce 16 beds

NOTES Project #03-095 approved on 11/4/04 - Completion date - 10/21/08 - Discontinue 50 Medical-Surgical beds and 32 Acute Mental Illness beds. M/S is now 197 and AMI now totals 22.

5017 Adventist LaGrange Memorial Hospital 5101 S. Willow Springs Road La Grange, IL 60525-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	165	0	165	Board Authorized 8 bed reduction
PEDIATRIC	8	8	0	
OBSTETRIC-GYNECOLOGY	23	10	13	
INTENSIVE CARE	27	0	27	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	223	18	205	Board to reduce 18 beds

NOTES Project #08-105 approved by Board on April 22, 2009 results in decrease of 8 pediatric beds. Pediatric totals now 0.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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3475 Advocate - Good Shepherd Hospital		450 West Highway #22		Barrington, IL 60010-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	113	0	113	
PEDIATRIC	14	0	14	
OBSTETRIC-GYNECOLOGY	24	0	24	
INTENSIVE CARE	18	0	18	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	14	0	14	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	183	0	183	

NOTES

3871 Advocate Bethany Hospital		3435 West Van Buren		Chicago, IL 60624 -000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	87	1	86	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	87	1	86	Board reclassified the beds under LTAC per PART 1100 - Board to reduce 1

NOTES Project #06-008/ on 9/12/06; Discontinue OB and AMI category of service. Completion date - 12/31/06

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0315 Advocate Christ Medical Center 4440 West 95th Street Oak Lawn, IL 60453

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	378	0	378	
PEDIATRIC	45	0	45	
OBSTETRIC-GYNECOLOGY	39	0	39	
INTENSIVE CARE	103	0	103	
NEONATAL INTENSIVE CARE	37	0	37	
ACUTE/CHRONIC MENTAL ILLNES	56	0	56	
REHABILITATION	37	0	37	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	695	0	695	

NOTES On 7/1/2007 a Bed Change request per 10 bed rule permitted the facility to convert 10 beds from Acute Mental Illness to Medical-Surgical. Hospital now authorized for 378 Medical-Surgical beds.

3384 Advocate Good Samaritan Hospital 3815 Highland Avenue Downers Grove, IL 60515-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	185	0	185	
PEDIATRIC	16	0	16	
OBSTETRIC-GYNECOLOGY	36	0	36	
INTENSIVE CARE	44	0	44	
NEONATAL INTENSIVE CARE	11	0	11	
ACUTE/CHRONIC MENTAL ILLNES	48	7	41	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	340	7	333	Board to reduce 7 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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5165 Advocate Illinois Masonic Medical Center 836 West Wellington Chicago, IL 60657-5193

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	347	122	225	Board to reduce 143 beds
PEDIATRIC	30	16	14	
OBSTETRIC-GYNECOLOGY	53	2	51	
INTENSIVE CARE	37	0	37	
NEONATAL INTENSIVE CARE	20	0	20	
ACUTE/CHRONIC MENTAL ILLNES	40	1	39	
REHABILITATION	24	2	22	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	551	143	408	

NOTES

4796 Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	313	0	313	Board to reduce 7 beds
PEDIATRIC	48	0	48	
OBSTETRIC-GYNECOLOGY	62	0	62	
INTENSIVE CARE	61	0	61	
NEONATAL INTENSIVE CARE	54	0	54	
ACUTE/CHRONIC MENTAL ILLNES	62	7	55	
REHABILITATION	45	0	45	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	645	7	638	

NOTES Project #05-037/ approved on 11/1/05, with completion date of 10/31/09 - Construct a 9-level replacement bed tower containing 192 beds (part M/S, Ped, ICU, NICU, OB and Rehab beds) and add 18 ICU and 10 Med/Surg beds under 10% or 10 bed rule.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4697

Advocate South Suburban Hospital

17800 South Kedzie Avenue

Hazel Crest, IL 60429-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	207	0	207	Board to reduce 5 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	46	5	41	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	289	5	284	

NOTES

4176

Advocate Trinity Hospital

2320 East 93rd Street

Chicago, IL 60617-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	206	34	172	Board to reduce 43 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	32	9	23	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	250	43	207	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5009 Alexian Brothers Behavioral Health Hospital 1650 Moon Lake Boulevard Hoffman Estates, IL 60194-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	137	0	0	
REHABILITATION	0	0	137	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	137	0	137	

NOTES

2238 Alexian Brothers Medical Center 800 Biesterfield Road Elk Grove Villa, IL 60007-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	241	0	241	
PEDIATRIC	16	0	16	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	36	0	36	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	66	0	66	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	387	0	387	

NOTES Project #06-040/ on 10/25/06- completion date - 4/1/2010 - Major modernization to an existing facility, Replacement of the critical care units and add 10 ICU beds, new construction of two 36 bed M/S units and decrease 18 M/S beds and 8 OB beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0026 Alton Memorial Hospital		One Memorial Drive		Alton, IL 62002-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	117	0	117	
PEDIATRIC	18	14	4	
OBSTETRIC-GYNECOLOGY	25	0	25	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	20	0	20	
REHABILITATION	0	0	0	
LONG-TERM CARE	28	0	28	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	220	14	206	Board to reduce 14 beds

NOTES

4119 Anderson Hospital		6800 State Route 162		Maryville, IL 62062-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	98	0	98	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	24	0	24	Bed Change on 6/16/2008 - addition of 9 OB beds to existing facility. Now
INTENSIVE CARE	7	0	7	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	144	0	144	No Board action needed for OB beds - Bed Change in place -

NOTES

Bed Change on 6/16/2008, resulted in addition of 9 Obstetrics beds to existing facility. It now has 24 OB beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5207 Aurora Chicago Lakeshore Hospital 4840 North Marine Drive Chicago, IL 60640-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	147	0	0	
REHABILITATION	0	1	146	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	147	0	0	
		1	146	Board to reduce 1 bed

NOTES

0141 Blessing Hospital @ 11th Street Broadway @ 11th Street Quincy, IL 62305-7005

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	207	3	204	
PEDIATRIC	23	3	20	
OBSTETRIC-GYNECOLOGY	25	0	25	
INTENSIVE CARE	25	0	25	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	16	0	16	
LONG-TERM CARE	44	24	20	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	340	0	0	
		30	310	Board to reduce 30 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4515 Blessing Hospital @ 14th Street Broadway @ 14th Street Quincy, IL 62305-7005

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	39	0	39	Board to reduce 0 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	56	0	0	
REHABILITATION	0	0	56	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	95	0	95	

NOTES

4812 BroMenn Regional Medical Center 1304 Franklin Avenue Normal, IL 61761

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	134	0	134	#08-076 - Increase 6 OB beds
PEDIATRIC	11	0	11	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	28	9	19	
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	230	9	221	

NOTES

#08-076 - approved on Jan 2009 ; Board increased 6 OB beds, now OB=30

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

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Carle Foundation Hospital

611 West Park Street

Urbana, IL 61801-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	185	0	185	
PEDIATRIC	20	0	20	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	32	0	32	
NEONATAL INTENSIVE CARE	25	0	25	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	305	0	305	

NOTES On 3/15/2007, a Bed Change per 10 bed rule was approved. Resulted in addition of 8 Medical-Surgical beds and 2 Obstetrics beds to an existing unit. Hospital now has 28 Obstetrics beds and 185 Medical-Surgical beds.

0182

Carlinville Area Hospital

1001 East Morgan Street

Carlinville, IL 62626-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	25	0	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	25	

NOTES

Project #08-016, approved on 8/12/2008 resulted in establishment of a replacement hospital. The hospital will now have 25 authorized M/S beds, a reduction of 8 Medical-Surgical beds. Project completion date is 3/1/2011

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0216 Central DuPage Hospital		25 North Winfield Road		Winfield, IL 60190-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	213	0	213	
PEDIATRIC	10	0	10	
OBSTETRIC-GYNECOLOGY	35	0	35	
INTENSIVE CARE	32	0	32	
NEONATAL INTENSIVE CARE	8	0	8	
ACUTE/CHRONIC MENTAL ILLNES	15	0	15	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	313	0	313	

NOTES On 10/23/2007, project # 07-059 approved for modernization, including the discontinuation of 48 M/S beds.

0364 CGH Medical Center		100 East LeFevre Road		Sterling, IL 61081-1279
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	92	17	75	
PEDIATRIC	12	6	6	
OBSTETRIC-GYNECOLOGY	13	3	10	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	125	26	99	Board to reduce 26 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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31379 Children's Memorial Hospital		2300 Childrens Plaza		Chicago, IL 60614-3363
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	0	0	0	Board to reduce 2 (ped) beds - #07-134 in place

NOTES

Project #07-134 was approved 2/26/2008 for replacement hospital with completion date of 4/30/2014; Construction of 288 bed replacement hospital with 156 Ped, 60 ICU, 60 Neonatal III and 12 AMI beds (decrease of 6 AMI beds)

3137 Children's Memorial Hospital		Chicago Avenue - Replacement		Chicago, IL 60614-3363
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	156	0	156	Project #07-134 - increase of 5 ped beds; from 151 to 156
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	60	0	60	Project #07-134 with 60 ICU beds, an increase of 12 beds (from 48 to 60).
NEONATAL INTENSIVE CARE	60	0	60	Project #07-134 with increase of 7 NICU beds from 53 to 60 beds.
ACUTE/CHRONIC MENTAL ILLNES	12	0	12	Project #07-134 - reduce in 6 AMI beds. Beds now total to 12 from 18 beds
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	288	0	288	Board approved Replacemnt hospital at new location - #07-134

NOTES

Project #07-134 was approved 2/26/2008 for replacement hospital with completion date of 4/30/2014; Construction of 288 bed replacement hospital with 156 Ped, 60 ICU, 60 Neonatal III and 12 AMI beds (decrease of 6 AMI beds)

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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Flora, Il 62839-0000

NOTES

NOTES

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0414 Community Memorial Hospital

400 Caldwell Street

Staunton, IL 62088-1499

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	43	22	21	
PEDIATRIC	2	2	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	49	24	25	
				Board to reduce 24 beds

NOTES

0422 Condell Medical Center

801 South Milwaukee Avenue

Libertyville, IL 60048-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	214	0	214	
PEDIATRIC	18	2	16	
OBSTETRIC-GYNECOLOGY	26	0	26	
INTENSIVE CARE	25	0	25	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	283	2	281	
				Board to reduce 2 beds

NOTES Project # 06-026/ on 7/18/06- completion date - 6/1/10 - Major Modernization with new construction of existing services and add 68 M/S beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0455 Crawford Memorial Hospital		1000 North Allen Ave		Robinson, IL 62454-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	48	27	21	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	6	2	4	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	48	10	38	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	102	39	63	Board to reduce 39 beds

NOTES

3947 Crossroads Community Hospital		8 Doctors Park Road		#8 DOCTORS PARK ROAD
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	47	0	47	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	5	0	5	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	52	0	52	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0471 Decatur Memorial Hospital 2300 North Edward Street Decatur, IL 62526-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	209	5	204	
PEDIATRIC	18	0	18	
OBSTETRIC-GYNECOLOGY	28	2	26	
INTENSIVE CARE	32	0	32	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	69	8	61	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	356	15	341	
				Board to reduce 15 beds

NOTES

4333 Delnor Community Hospital 300 Randall Road Geneva, IL 60134-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	121	0	121	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	18	0	18	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	159	0	159	

NOTES Project # 05-020/ on 9/22/05- completion date - 2/28/09 - Modernize patient care and support areas and add 31 Med/Surg beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1164 Dr. John Warner Hospital		422 West White Street		Clinton, IL 61727-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	36	15	21	
PEDIATRIC	3	0	3	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	2	2	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	43	17	26	Board to reduce 17 beds

NOTES

3905 Edward Hospital		801 South Washington Street		Naperville, IL 60540-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	199	0	199	
PEDIATRIC	7	0	7	
OBSTETRIC-GYNECOLOGY	39	0	39	
INTENSIVE CARE	60	0	60	Project # 07-138 - addition of 12 Intensive Care beds. Total ICU beds = 60
NEONATAL INTENSIVE CARE	12	0	12	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	317	0	317	No Board action is required - # 07-138 in progress

NOTES

Project #07-091/ on 10/23/07- completion date - 12/31/08 - major Modernization and increase 14 OB and 9 ICU beds.

On 2/26/2008, Project # 07-138 was issued for modernization, including the addition of 12 Intensive Care beds and discontinue 6 NICU. Facility will have 60 Intensive Care and 12 NICU beds upon project completion. Date of completion is 9/30/2010.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1511 Elmhurst Memorial Hospital		200 Berteau Avenue		Elmhurst, IL 60126-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	Project 07-104 - discontinue entire 201 M/S beds at Berteau
PEDIATRIC	0	0	0	Project 07-104 - discontinue entire 26 Peds
OBSTETRIC-GYNECOLOGY	0	0	0	Project 07-104 - discontinue 26 OB
INTENSIVE CARE	0	0	0	Board to reduce 265 beds - #07-104 - discontinue - 30 ICU beds
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	18	0	0	
REHABILITATION	0	0	18	
LONG-TERM CARE	38	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	56	0	56	Board authorized for discontinue of services at Berteau location - #07-104 in

NOTES Project #07-104 approved on 2/26/2008, received permission to establish new hospital on York Street; includes discontinuation of 289 M/S beds, 26 Peds, 26 OB, 30 ICU beds at Berteau Avenue location.
Facility will continue to operate 38 LTC and 18 AMI beds. The project completion is stated for 6/30/2013.

9943 Elmhurst Memorial Hospital		York street		Elmhurst, IL 60126-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	198	0	198	Project 07-104 - discontinue entire 201 M/S beds at Berteau
PEDIATRIC	6	0	6	Project 07-104 - discontinue entire 26 Peds
OBSTETRIC-GYNECOLOGY	20	0	20	Project 07-104 - discontinue 26 OB
INTENSIVE CARE	35	0	35	Board to reduce 265 beds - #07-104 - discontinue - 30 ICU beds
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	259	0	259	Board authorized for new hospital at York Street - #07-104 in progress

NOTES Project #07-104 approved on 2/26/2008, received permission to establish new hospital on York Street; includes discontinuation of 289 M/S beds, 26 Peds, 26 OB, 30 ICU beds at Berteau Avenue location.
Facility will continue to operate 38 LTC and 18 AMI beds. The project completion is stated for 6/30/2013.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3574 Eureka Hospital		101 South Major Street		Eureka, IL 61530-0203
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	34	9	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	34	9	25	Board to reduce 9 Beds

NOTES

0646 Evanston Hospital		2650 Ridge Avenue		Evanston, IL 60201-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	192	0	192	
PEDIATRIC	15	0	15	
OBSTETRIC-GYNECOLOGY	52	0	52	
INTENSIVE CARE	26	0	26	
NEONATAL INTENSIVE CARE	44	0	44	
ACUTE/CHRONIC MENTAL ILLNES	36	19	17	
REHABILITATION	24	2	22	
LONG-TERM CARE	0	0	0	Project #07-136 - discontinued entire 32-bed LTC
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	389	21	368	Board to reduce 21 beds (19 AMI and 2 Rehab)

NOTES Project #06-081/ on 5/1/07- completion date - 7/12/2010- Major Modernization with new construction, increase operating rooms from 14 to 16, decrease ICU beds from 32 to 26 and decrease M/S beds from 241 to 192.

Project #07-136 approved on 1/15/2008, a permit was issued to discontinue entire 32-bed General Nursing (Long-Term Care) category of service.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0679 Fairfield Memorial Hospital		N.W. 11th Street		Fairfield, IL 62837-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	20	0	20	#08-084 -Board discontinued OB service
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	30	0	30	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	54	0	54	

NOTES

project #08-084 approved on Jan 2009 discontinue 5 OB beds

0695 Fayette County Hospital		650 West Taylor Street		Vandalia, IL 62471-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	48	23	25	Board to reduce 42 Beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	104	19	85	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	156	42	114	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0703 Ferrell Hospital		1201 Pine Street		Eldorado, IL 62930-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	52	26	26	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	52	26	26	Board to reduce 26 beds

NOTES

4630 Foster G. McGaw Hospital - Loyola University M		2160 South 1st Avenue		Maywood, IL 60153-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	298	0	298	
PEDIATRIC	34	0	34	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	134	9	125	
NEONATAL INTENSIVE CARE	50	0	50	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	24	0	24	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	570	9	561	Board to reduce 9 beds

NOTES Project #05-023/ on 9/22/05 - completion 1/31/2010 - add 45 Med/Surg beds, 1 cath lab, 9 ORs with support space and construct a new hospital entrance; construct a 7-story wing for surgical admitting, cardiac diagnosis, OR suite and recovery

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4770 Franklin Hospital		201 Bailey Lane		Benton, IL 62812-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	71	46	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	Project #07-088 - Discontinue entire 83 bed LTC unit
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	75	46	29	Board to reduce 46 M/S beds

NOTES Project #07-088 approved on 10/22/07 Project Completion date - 4/30/08 - Discontinue a 83 bed skilled nursing category of service.

0778 Freeport Memorial Hospital		1045 West Stephenson		Freeport, IL 61032-4899
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	109	0	109	
PEDIATRIC	18	3	15	
OBSTETRIC-GYNECOLOGY	25	11	14	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	43	17	26	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	203	31	172	Board to reduce 31 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0794 Galesburg Cottage Hospital 695 North Kellogg Street Galesburg, IL 61401-

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	87	0	87	
PEDIATRIC	18	0	18	
OBSTETRIC-GYNECOLOGY	10	0	10	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	12	0	12	
REHABILITATION	0	0	0	
LONG-TERM CARE	34	0	34	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	173	0	173	

NOTES

5223 Gateway Regional Medical Center 2100 Madison Avenue Granite City, IL 62040-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	222	41	181	
PEDIATRIC	28	0	28	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	15	3	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	90	0	90	
REHABILITATION	14	0	14	
LONG-TERM CARE	19	0	19	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	416	44	372	Board to reduce 44 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4036 Genesis Medical Center - Illini Campus		801 Illini Drive		Silvis, IL 61282
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	105	0	105	
PEDIATRIC	16	0	16	
OBSTETRIC-GYNECOLOGY	21	0	21	
INTENSIVE CARE	7	0	7	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	149	0	149	

NOTES

0836 Gibson Community Hospital		1120 North Melvin Street		Gibson City, IL 60936-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	29	5	24	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	8	0	8	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	16	0	16	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	56	5	51	Board to reduce 5 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3483

Glenbrook Hospital

2100 Pfingsten Road

Glenview, IL 60025-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	136	0	136	Bed Change approved on 3/24/2008 add 5 ICU beds (12 to 17) to existing
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	17	0	17	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	153	0	153	

NOTES On 9/19/2007, a Bed Change per 10 bed rule permitted to add 5 Medical-Surgical beds to existing service. Hospital now authorized for 136 Medical-Surgical beds.
 Bed Change approved on 3/24/2008, Glenbrook Hospital, Glenbrook, received permission to add 5 Intensive Care beds to existing category of service. Beds became operational March 24, 2008.

47059

Good Samaritan Regional Health Center

605 North 12th Street

Mount Vernon, IL 62864-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	Bed change request approved on 10/17/08 - discontinue 5 (16 to 11) Ped
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	Bed Change approved
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	0	0	0	

NOTES Bed change request approved on 10/17/08, per 10 bed rule permitted to add 2 Intensive Care beds and to discontinue 5 Pediatrics beds and 4 Rehab beds. The hospital is now authorized for 12 Intensive Care and 11 Pediatrics beds, effective 1/12/06.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4705 Good Samaritan Regional Health Center		Replacement		Mount Vernon, IL 62864-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	99	0	99	#08-051 - replacement hospital
PEDIATRIC	0	0	0	No peds in new replacement hospital
OBSTETRIC-GYNECOLOGY	9	0	9	#08-051 - replacement hospital at new location
INTENSIVE CARE	16	0	16	#08-051 - replacemnt hospital
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	10	0	10	#08-051 - replacement hospital at new location
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	134	0	134	

NOTES Bed change request approved on 10/17/08, per 10 bed rule permitted to add 2 Intensive Care beds and to discontinue 5 Pediatrics beds and 4 Rehab beds. The hospital is now authorized for 12 Intensive Care and 11 Pediatrics beds, effective 1/12/06.

Project # 08-051 on Jan 2009, Board approved for a 134 bed replacement hospital with M/S=99, OB=9, ICU=16, Rehab =10 at new location.

0851 Gottlieb Memorial Hospital		701 West North Avenue		Melrose Park, IL 60160-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	154	0	154	
PEDIATRIC	12	0	12	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	24	0	24	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	10	0	10	
REHABILITATION	0	0	0	
LONG-TERM CARE	44	10	34	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	274	10	264	Board to reduce 10 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0869 Graham Hospital		210 West Walnut		Canton, IL 61520-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	53	14	39	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	12	4	8	
INTENSIVE CARE	5	0	5	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	54	0	54	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	124	18	106	Board to reduce 18 beds

NOTES

6666 Greater Peoria Speciality Hospital		Richard Pryor & Romeo B. Garrett &		Peoria, IL 61605
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	50	0	50	
TOTAL BEDS	50	0	50	#07-010, establish a new facility with 50 LTACH beds. According to rule ap

NOTES

#07-010, establish a new facility with 8 ICU and 42 M/S beds. According to rule approved by the Board these 50 beds now become LTACH beds. Hospital not in operation in 2007.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0570 Greenville Regional Hospital, Inc.		200 Healthcare Drive		Greenville, IL 62246-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	26	0	26	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	4	0	4	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	10	0	10	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	42	0	42	

NOTES

0885 Hamilton Memorial Hospital		611 South Marshall		McLeansboro, IL 62859-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	25	0	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	60	0	60	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	85	0	85	

NOTES Project # 07-079/ on 10/23/07- Completion date - 1/31/2010 - Major modernization with discontinuation of 12 M/S beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0893 Hammond Henry Hospital

600 N. College Avenue

Geneseo, IL 61254-1099

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	36	20	16	Board to reduce 26 Beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	7	4	3	
INTENSIVE CARE	5	1	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	57	1	56	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	105	26	79	

NOTES

0901 Hardin County General Hospital

Ferrell Road

Rosiclare, IL 62982-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	48	23	25	Board to reduce 23 Beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	48	23	25	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0521 Harrisburg Medical Center		100 Dr. Warren Tuttle Drive		Harrisburg, IL 62946-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	56	8	48	
PEDIATRIC	3	0	3	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	27	0	0	
REHABILITATION	0	0	27	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	86	8	78	Board to reduce 8 Beds

NOTES

4911 Harvard Memorial Hospital (nka Mercy Harvard		901 South Grant Street		Harvard, IL 60033-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	29	12	17	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	45	0	45	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	77	12	65	Board to reduce 12 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4739 Heartland Regional Medical Center 3333 West Deyoung Marion, IL 62959-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	68	0	68	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	12	0	12	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	92	0	92	

NOTES

0935 Herrin Hospital 201 South 14th Street Herrin, IL 62948-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	67	0	67	10 M/S beds approved without a permit as of a 4/08
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	32	3	29	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	107	3	104	
				Board to reduce 3 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5066 Highland Park Hospital		777 Park Avenue West		Highland Park, IL 60035-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	138	40	98	
PEDIATRIC	6	0	6	
OBSTETRIC-GYNECOLOGY	25	0	25	
INTENSIVE CARE	17	1	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	25	12	13	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	211	53	158	Board to reduce 53 Beds

NOTES

0968 Hillsboro Area Hospital		1200 East Tremont Street		Hillsboro, IL 62049-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	54	14	40	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	Project #07-151- Discontinue 40 LTC beds. LTC=0
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	54	14	40	Board to reduce 14 Beds - Project 07-151 in progress

NOTES

Project #07-151 approved on 04/08/2008, received a permit to discontinue entire Skilled Nursing (Long-Term Care) unit. Discontinue 40 LTC beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0992 Holy Cross Hospital		2701 West 68th Street		Chicago, IL 60629-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	204	0	204	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	34	0	34	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	274	0	274	

NOTES

1008 Holy Family Medical Center		100 North River Road		Des Plaines, IL 60016-1278
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	59	0	59	59 M/S beds used as Substance Abuse beds.
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	179	50	129	
TOTAL BEDS	238	50	188	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09 Board reclassified the beds under LTAC per PART 1100 - Board to reduce

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4200 Hoopeston Community Memorial Hospital		701 East Orange Street		Hoopeston, IL 60942-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	24	0	24	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	24	0	24	

NOTES

1024 Hopedale Hospital		Tremont & Second Street		Hopedale, IL 61747-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	29	9	20	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	5	0	5	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	34	9	25	Board to reduce 9 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5132 Illini Community Hospital		640 West Washington		Pittsfield, IL 62363-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	31	12	19	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	37	12	25	Board to reduce 12 beds

NOTES

3418 Illinois Valley Community Hospital		925 West Street		Peru, IL 61354-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	107	51	56	
PEDIATRIC	10	8	2	
OBSTETRIC-GYNECOLOGY	17	1	16	
INTENSIVE CARE	9	0	9	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	143	60	83	Board to reduce 60 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1099 Ingalls Memorial Hospital		One Ingalls Drive		Harvey, IL 60426-3558
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	355	0	355	
PEDIATRIC	49	0	49	
OBSTETRIC-GYNECOLOGY	32	0	32	
INTENSIVE CARE	26	0	26	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	48	0	48	
REHABILITATION	53	0	53	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	563	0	563	

NOTES

1107 Iroquois Memorial Hospital		200 Fairman Street		Watseka, IL 60970-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	76	20	56	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	12	0	12	
INTENSIVE CARE	6	0	6	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	94	20	74	Board to reduce 20 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1115 Jackson Park Hosp. Foundation 7531 Stony Island Avenue Chicago, IL 60649-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	203	0	203	Board to reduce 7 beds
PEDIATRIC	15	7	8	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	86	0	86	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	336	7	329	

NOTES

1156 Jersey Community Hospital 400 Maple Summit Road Jerseyville, IL 62052-0426

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	51	0	51	
PEDIATRIC	4	0	4	
OBSTETRIC-GYNECOLOGY	8	2	6	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	67	2	65	
				Board to reduce 2 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2758

John & Mary Kirby Hospital

1111 North State Street

Monticello, IL 61856-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	16	0	16	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	16	0	16	
				NO Change in Authorized Beds

NOTES

0430

John H. Stroger Hospital of Cook County

1901 West Harrison Street - Suite 56

Chicago, IL 60612-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	228	0	228	
PEDIATRIC	40	0	40	
OBSTETRIC-GYNECOLOGY	40	0	40	
INTENSIVE CARE	98	0	98	
NEONATAL INTENSIVE CARE	58	0	58	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	464	0	464	
				No Change in Authorized Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0497 Katherine Shaw Bethea Hospital 403 East First Street Dixon, IL 61021-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	43	0	43	
PEDIATRIC	13	3	10	
OBSTETRIC-GYNECOLOGY	7	0	7	
INTENSIVE CARE	6	0	6	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	15	1	14	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	84	4	80	
				Board to reduce 4 Beds

NOTES

2667 Kenneth Hall Regional Hospital 129 North 8th Street East St. Louis, IL 62201-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	Project # 07-105 - Resulted in discontinuation of 115 M/S. Project # 07-105 - Resulted in discontinuation of 7 Peds.
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	Project # 07-105 - Resulted in discontinuation of entire 8 ICU beds
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	39	0	0	
REHABILITATION	0	0	39	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	39	0	39	No Change in Authorized Beds

NOTES

On 4/8/2008, Project # 07-105 was issued for merger of Touchette Regional Hospital and Kenneth Hall Regional Hospital. Resulted in discontinuation of 115 M/S, 7 Ped and 8 ICU beds. Kenneth Hall now has only 39 AMI beds. Completion date is 7/15/08.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1198 Kewanee Hospital		719 Elliott Street		Kewanee, IL 61443-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	19	0	19	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	3	0	3	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	25	No Change in Authorized Beds

NOTES

4564 Kindred Chicago Central Hospital		4058 West Melrose Street		Chicago, IL 60641-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	114	12	102	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	114	12	102	Board reclassified the beds under LTAC per PART 1100

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4937 Kindred Hospital Chicago North 2544 West Montrose Avenue Chicago, IL 60618-1537

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	31	0	0	
REHABILITATION	0	0	31	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	134	1	133	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	165	1	164	Board reclassified the beds under LTAC per PART 1100

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

4952 Kindred Hospital - Chicago Northlake 365 East North Avenue Northlake, IL 60164-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	94	0	94	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	94	0	94	Board reclassified the beds under LTAC per PART 1100

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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7777

Kindred Hospital - Springfield

Springfield, IL

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	50	0	50	
TOTAL BEDS	50	0	50	#08-014, Construct and Establish a 50 bed LTAC Facility.

NOTES

#08-014, Construct and Establish a 50 bed LTAC Facility. Hospital not in operation in 2007

4945

Kindred Hospital - Sycamore

225 Edwards Street

Sycamore, IL 60178-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	69	0	69	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	69	0	69	Board reclassified the beds under LTAC per PART 1100

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3400 Kishwaukee Community Hospital		One Kish Hospital Drive		DeKalb, IL 60115-0707
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	70	0	70	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	12	0	12	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	6	0	6	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	100	0	100	

NOTES

1230 Lake Forest Hospital		660 North Westmoreland		Lake Forest, IL 60045
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	74	0	74	
PEDIATRIC	10	0	10	
OBSTETRIC-GYNECOLOGY	23	0	23	
INTENSIVE CARE	10	0	10	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	98	10	88	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	215	10	205	Board to reduce 10 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3012 LaRabida Children's Hospital East 65th Street at Lake Michigan Chicago, IL 60649-

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	49	0	49	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	49	0	49	

NOTES This hospital's bed numbers are shown for informational purposes only. Per the HFPB rules, this facility is currently classified as a "Specialized Long Term Care, Long-Term Medical Care for Children."

1255 Lawrence County Memorial Hospital 2200 West State Street Lawrenceville, IL 62439-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	25	0	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	10	0	10	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	35	0	35	No Change in Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5033 Lincoln Park Hospital		550 West Webster		Chicago, IL 60614-3787
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	293	293	0	Project #09-003 M/S= 0
PEDIATRIC	21	21	0	Project #09-003, peds=0
OBSTETRIC-GYNECOLOGY	20	20	0	Project #09-003, OB=0
INTENSIVE CARE	32	32	0	Project #09-003, ICU=0
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	30	30	0	Project #09-003, AMI =0
REHABILITATION	24	24	0	Project #09-003, rehab=0
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	420	420	0	Board to reduce 420 Beds

NOTES

Project #09-003, approved on 4/22/09, resulted discontinuation of all services at Lincoln Park. M/S, Peds, OB, ICU, Rehab and AMI category of service beds now equal 0

5058 Linden Oaks Hospital		801 South Washington Street		Naperville, IL 60540-6400
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	110	9	101	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	110	9	101	Board to reduce 9 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1271 Little Company of Mary Hospital & Health Care 2800 West 95th Street Evergreen Park, IL 60805

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	339	131	208	#08-087 - reduce 4 M/S beds; M/S = 208
PEDIATRIC	37	17	20	
OBSTETRIC-GYNECOLOGY	40	23	17	#08-087 reduce 15OB beds; results in OB beds = 17
INTENSIVE CARE	29	0	29	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	32	8	24	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	477	179	298	Board to reduce 179 beds

NOTES

Project # 08-087 approved by Board on 4/22/09 reduces M/S by 131 beds and OB by 23 beds. M/S = 208 and OB= 17.

1289 Loretto Hospital 645 South Central Avenue Chicago, IL 60644-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	125	36	89	
PEDIATRIC	10	0	10	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	76	0	76	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	223	36	187	Board to reduce 36 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5249

Louis A. Weiss Memorial Hospital

4646 North Marine Drive

Chicago, IL 60640-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	287	103	184	Board to reduce 103 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	16	0	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	10	0	10	
REHABILITATION	26	0	26	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	339	103	236	

NOTES Project #07-064/ on 7/24/07- completion date 8/13/07 - Discontinue an 18 bed OB category of service.

5082

MacNeal Memorial Hospital

3249 South Oak Park Avenue

Berwyn, IL 60402-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	301	29	272	Board to reduce 30 beds
PEDIATRIC	10	0	10	
OBSTETRIC-GYNECOLOGY	25	0	25	
INTENSIVE CARE	26	0	26	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	65	1	64	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	427	30	397	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3228

Marianjoy Rehabilitation Center

26 West 171 Roosevelt Road

Wheaton, IL 60187-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	100	0	100	
LONG-TERM CARE	20	0	20	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	120	0	120	

NOTES Project # 07-042/ on 7/24/07- completion date - 1/31/08 - Discontinue 20 Rehabilitation beds and establish a 20 bed skilled nursing category of service.

1388

Marshall Browning Hospital

900 North Washington

DuQuoin, IL 62832-0192

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	27	2	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	27	2	25	Board to reduce 2 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5090 Maryville Academy / Scott A. Nolan Center		555 Wilson Lane		Des Plaines, IL 60016-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	180	0	0	
REHABILITATION	0	0	180	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	180	0	180	No Board action is required to reduce beds- refurbishment project in proces

NOTES

1412 Mason District Hospital		615 North Promenade		Havana, IL 62644-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	37	12	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	37	12	25	Board to reduce 12 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1420 Massac Memorial Hospital		28 Chick Street		Metropolis, IL 62960-0850
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	25	5	20	5 ICU Beds to be reduced - # 06-044 in progress.
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	5	20	Board to reduce 5 beds

NOTES Project # 06-044/ on 10/25/06- .Completion date - 7/31/08- Discontinue 6 bed ICU category of service.Modernization of Pharmacy, Laboratory, Inpatient rooms, Surgery Prep, Emergency, Imaging, main entry and Admissions

1438 McDonough District Hospital		525 East Grant Street		Macomb, IL 61455-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	72	0	72	
PEDIATRIC	8	2	6	
OBSTETRIC-GYNECOLOGY	10	0	10	
INTENSIVE CARE	7	0	7	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	16	0	16	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	113	2	111	Board to reduce 2 Beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1495 Memorial Hospital		1900 State Street		Chester, IL 62233-1116
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	54	31	23	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	2	2	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	58	33	25	Board to reduce 33 beds

NOTES

1529 Memorial Hospital		402 South Adams St		Carthage, IL 62321-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	15	0	15	Project # 07-112, 18 bed Hospital replacement facility with 15 M/S beds.
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	2	0	2	Project #07-112 , 18 bed replacement facility with 2 OB beds.
INTENSIVE CARE	1	0	1	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	18	0	18	No Board action is required - #07-112 in progress

NOTES Project # 07-112/ on 12/4/07- completion date - 5/31/2010- Construct a 18 bed Hospital replacement facility with 15 M/S, 2 OB, and 1 ICU beds. Discontinue the existing 48 bed facility with 38 M/S, 6 OB and 4 ICU beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1461 Memorial Hospital		4500 Memorial Drive		Belleville, IL 62223-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	250	0	250	
PEDIATRIC	18	0	18	
OBSTETRIC-GYNECOLOGY	29	0	29	
INTENSIVE CARE	16	0	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	313	0	313	

NOTES

0513 Memorial Hospital Of Carbondale		405 West Jackson Street		Carbondale, IL 62901-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	85	0	85	
PEDIATRIC	14	0	14	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	13	0	13	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	140	0	140	

NOTES Project #06-017/ on 7/18/06- completion date - 9/30/08 - Construct a two-story addition and Modernize existing M/S unit with the addition of 11 M/S beds

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1487	Memorial Medical Center	701 N 1st	Springfield, IL 62781-0000	
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	374	14	360	
PEDIATRIC	16	9	7	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	44	0	44	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	50	0	50	
REHABILITATION	34	4	30	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	534	27	507	Board to reduce 27 beds

NOTES Bed Change approved on 6/26/2007, Memorial Medical Center - Springfield, received permission to discontinue 38 Acute Mental Illness beds. The hospital is now authorized for 50 Acute Mental Illness beds.

On 3/28/08, a Bed Change request per 10 bed rule permitted to add 10 Intensive Care beds to an existing category of service.

4606	Memorial Medical Center New	Highway #14 & Doty Road	Woodstock, IL 60098-0000	
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	74	0	74	Project #08-002 - addition of 14 M/S (60 to 74)
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	20	0	20	Project #08-002 - addition of 6 Obstetric beds (14 to 20)
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	106	0	106	No Board action is required - #08-002 in progress

NOTES Project #08-002 approved on 7/1/2008, MMC-New Woodstock, received permit for modernization of existing hospital, including the addition of 14 M/S and 6 Obstetric beds. Facility now has 74 M/S and 20 OB beds. Project completion date is 5/31/2012.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1503 Memorial Medical Center Old		527 West South Street		Woodstock, IL 60098-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	44	0	0	
REHABILITATION	0	0	44	
LONG-TERM CARE	40	0	0	
LONG-TERM ACUTE CARE	0	0	40	
TOTAL BEDS	84	0	0	
		0	84	

NOTES

1537 Mendota Community Hospital		New Location		Mendota, IL 61342-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	21	0	21	#08-106 M/S= 21
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	0	#08-106
NEONATAL INTENSIVE CARE	0	0	4	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	0	
		0	25	Board to reduce 13 beds

NOTES

According to project #08-106, approved on 4/22/09, Board approved Mendota to establish a new hospital and discontinue the present hospital. New facility has M/S beds=21 and ICU=4. Total beds for this critical access hospital will be 25

According to project #08-106, approved on 4/22/09, Board approved Mendota to establish a new facility with M/S beds=21 and ICU=4. Total beds for this critical access hospital will be 25

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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15379 Mendota Community Hospital		1315 Memorial Drive		Mendota, IL 61342-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	#08-106 M/S= 21
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	#08-106
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	0	0	0	Board to reduce 13 beds

NOTES

According to project #08-106, approved on 4/22/09, Board approved Mendota to discontinue the present hospital with 38 beds and establish a new facility with M/S beds=21 and ICU=4. Total beds for this critical access hospital will be 25

According to project #08-106, approved on 4/22/09, Board approved Mendota to establish a new facility with M/S beds=21 and ICU=4. Total beds for this critical access hospital will be 25

3772 Mercer County Hospital		409 N.W 9th Avenue		Aledo, IL 61231-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	22	0	22	On 1/27/09, Board discontinued 3 ICU beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	On 1/27/09, discontinued 14 bed LTC
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	22	0	22	

NOTES

Settlement with Board on 3/30/05; Board reinstated a 3 bed Intensive Care unit which had been removed from the Inventory.

On 1/7/09, Board discontinued 3 ICU beds and 14 bed LTC

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1578 Mercy Hospital & Medical Center		2525 South Michigan Avenue		Chicago, IL 60616-2477
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	289	0	289	
PEDIATRIC	37	0	37	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	30	0	30	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	39	0	39	
REHABILITATION	24	0	24	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	449	0	449	

NOTES

0125 Methodist Hospital of Chicago		5025 North Paulina Street		Chicago, IL 60640-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	157	3	154	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	13	4	9	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	62	0	62	
REHABILITATION	0	0	0	
LONG-TERM CARE	23	0	23	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	255	7	248	Board to reduce 7 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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1594 Methodist Medical Center		221 Northeast Glen Oak		Peoria, IL 61636-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	168	0	168	Bed Change approved on 11/17/08 -10 bed increase to M/S . M/S beds=168
PEDIATRIC	12	0	12	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	36	10	26	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	68	0	68	
REHABILITATION	39	0	39	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	339	10	329	
				Board: To reduce only 10 beds.

NOTES Project #07-007 was issued to discontinue 24 bed Skilled Nursing (Long-Term Care) category of service. LTC service was discontinued effective 5/1/2007.
 Bed Change was approved on 11/17/08 resulted with 10 bed increase to M/S category of service under the 10 bed rule. The facility now has 168 M/S beds. Beds are effective as of Nov 3, 2008.

4986 Michael Reese Hospital		2929 South Ellis Avenue		Chicago, IL 60616-3395
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	456	273	183	
PEDIATRIC	50	22	28	
OBSTETRIC-GYNECOLOGY	81	33	48	
INTENSIVE CARE	42	19	23	
NEONATAL INTENSIVE CARE	33	0	33	
ACUTE/CHRONIC MENTAL ILLNES	80	0	80	
REHABILITATION	38	0	38	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	780	347	433	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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0786 Midwest Medical Center		One Medical Center Dr		Galena, IL 61036-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	25	0	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	25	

NOTES Project # 07-086, approved on 12/6/07 permitted for establishment of 57 bed general long term care facility. Project completed 12/7/07 (not under Hospital Licensure). Also name change from Galena Hospital to Midwest Medical Center

2956 Midwestern Regional Medical Center		2520 Elisha Avenue		Zion, IL 60099-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	91	18	73	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	95	18	77	Board to reduce 18 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1628 Morris Hospital & Healthcare Centers		150 West High Street		Morris, IL 60450
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	65	0	65	
PEDIATRIC	5	0	5	
OBSTETRIC-GYNECOLOGY	8	0	8	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	86	0	86	

NOTES

1636 Morrison Community Hospital		303 North Jackson Street		Morrison, IL 61270-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	25	0	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	25	0	25	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1644 Mount Sinai Hospital Medical Center		California at 15th Avenue		Chicago, IL 60608-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	276	111	165	Increase in 3 OB beds - 2/09
PEDIATRIC	31	0	31	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	34	4	30	
NEONATAL INTENSIVE CARE	35	0	35	
ACUTE/CHRONIC MENTAL ILLNES	28	0	28	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	434	115	319	Board to reduce 115 beds

NOTES

5173 Neurologic and Orthopeadic Institute of Chicag		4501 North Winchester Avenue		Chicago, IL 60640-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	52	0	52	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	18	0	18	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	85	0	85	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3889

Northern Illinois Medical Center

4201 Medical Center Drive

McHenry, IL 60050-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	129	0	129	Project#07-122 approved to add 25 M/S, now M/S beds total to 129.
PEDIATRIC	0	0	0	Project#07-122 - discontinue entire 6-bed Pediatrics
OBSTETRIC-GYNECOLOGY	19	0	19	
INTENSIVE CARE	18	0	18	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	Project#07-122 - discontinue entire 15-bed Acute Mental Illness category of
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	181	0	181	Board not to reduce any beds #07-122 in place

NOTES On 7/13/2007, a Bed Change per 10 bed rule was approved to convert 10 beds from AMI unit to Medical-Surgical category of service. Facility now authorized for 104 Medical-Surgical beds.
On 1/15/2008, Project#07-122 was approved to add 25 M/S and discontinue entire 6-bed Pediatrics and entire 15-bed Acute Mental Illness category of service. Facility now authorized for 129 M/S beds. Project completion date is 1/31/2009.

1701

Northwest Community Hospital

800 West Central Road

Arlington Heights, IL 60005-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	336	0	336	
PEDIATRIC	16	0	16	
OBSTETRIC-GYNECOLOGY	44	0	44	
INTENSIVE CARE	60	0	60	
NEONATAL INTENSIVE CARE	8	0	8	Project 08-101, add 8 NICU beds
ACUTE/CHRONIC MENTAL ILLNES	32	0	32	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	496	0	496	Board to add 8 NICU beds due to #08-101

NOTES Project #06-005/ on 4/25/06- Completion date - 9/30/2012 - Major modernization with New Construction. Discontinue 44 M/S beds , 37 AMI beds and 18 Pediatric beds. Add 24 ICU beds.
According to project #08-101, approved by the Board on 4/22/08, 8 (NICU) Neonatal Intensive Care beds have been added to the total beds. Hence beds in Northwest Comm Hospital total 496.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4820

Northwest Suburban Community Hospital

1625 South State Street

Belvidere, IL 61008-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	53	0	53	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	55	0	55	

NOTES

3251

Northwestern Memorial Hospital

240 East Ontario Suite 530

Chicago IL 60611-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	506	0	506	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	134	0	134	
INTENSIVE CARE	92	0	92	
NEONATAL INTENSIVE CARE	86	0	86	
ACUTE/CHRONIC MENTAL ILLNES	55	0	55	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	873	0	873	

NOTES

Bed Change approved on 2/22/2008 (based on 10 bed rule), resulted in reduction of Acute Mental Illness beds from 79 to 55.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1727 Norwegian American Hospital		1044 North Francisco Avenue		Chicago, IL 60622
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	98	0	98	
PEDIATRIC	5	0	5	
OBSTETRIC-GYNECOLOGY	48	0	48	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	37	0	37	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	200	0	200	

NOTES

1743 Oak Forest Hospital		159th & Cicero Avenue		Oak Forest, IL 60452-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	137	0	137	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	64	6	58	
LONG-TERM CARE	894	884	10	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	1103	890	213	Board to reduce 890 beds

NOTES Project #07-092/ Project is ruled Incomplete- Discontinue 894 Bed skilled Nursing category of service.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4929 OSF Holy Family Medical Center		1000 West Harlem Ave		Monmouth, IL 61462-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	23	0	23	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	45	0	45	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	68	0	68	

NOTES

2394 OSF Saint Francis Medical Center		530 N E Glen Oak Avenue		Peoria, IL 61637-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	306	0	306	
PEDIATRIC	32	0	32	
OBSTETRIC-GYNECOLOGY	54	0	54	Project #06-029/ - add 11 OB. Current OB count is 54 beds
INTENSIVE CARE	157	0	157	
NEONATAL INTENSIVE CARE	40	0	40	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	27	0	27	Project #06-029/ discontinue 33 Rehab beds. Current rehab beds are 27
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	616	0	616	No Board action required. #06-029 in place

NOTES Project #06-029/ on 9/12/06; Completion Date - 12/31/2010 - Major modernization with new construction. Add 88 ICU, 11 OB and 5 Neonatal Level 3 beds. Discontinue 123 M/S, 42 peds and 33 Rehab beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2444 OSF Saint James_John W. Albrecht Medical Ce 2500 W. Reynolds Pontiac, Il 61764-9774

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	33	0	33	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	4	0	4	
INTENSIVE CARE	5	0	5	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	42	0	42	

NOTES

1719 Our Lady of The Resurrection Medical Center 5645 West Addison Street Chicago, Il 60634-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	377	164	213	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	66	0	66	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	463	164	299	Board to reduce 164 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3210 Palos Community Hospital 12251 South 80th Avenue Palos Heights, IL 60463-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	306	0	306	Project #08-075 - approved on 3/10/09 -decrease in 9 M/S beds
PEDIATRIC	17	2	15	
OBSTETRIC-GYNECOLOGY	32	4	28	#08-075 approved on 3/10/09 - increase by 12 ICU beds
INTENSIVE CARE	36	0	36	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	48	0	48	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	Board to reduce 6 beds.
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	439	6	433	

NOTES

Project #08-075 approved on 3/10/09 increase of 12 ICU and decrease of 9 M/S beds for a total of 439 beds.

1776 Pana Community Hospital 101 East Ninth Street Pana, IL 62557-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	32	10	22	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	35	10	25	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1784 Paris Community Hospital		721 East Court Street		Paris, IL 61944-2420
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	49	21	28	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	49	21	28	Board to reduce 21 beds

NOTES

1792 Passavant Area Hospital		1600 West Walnut Street		Jacksonville, IL 62650-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	126	25	101	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	11	0	11	
INTENSIVE CARE	9	0	9	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	146	25	121	Board to reduce 25 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1834 Pekin Memorial Hospital		600 South 13th Street		Pekin, IL 61554-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	68	2	66	
PEDIATRIC	10	1	9	
OBSTETRIC-GYNECOLOGY	12	0	12	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	27	0	27	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	125	3	122	Board to reduce 3 beds

NOTES

1883 Perry Memorial Hospital		530 Park Avenue East		Princeton, IL 61356-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	65	47	18	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	10	6	4	
INTENSIVE CARE	8	5	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	83	58	25	Board to reduce 58 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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9193 Phoenix Medical Center		400 Plum Street		Carmi, IL 62821
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	10	0	10	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	10	0	10	#07-058, Board approved the permit to establish 10 bed hospital

NOTES

#07-058, Board approved the permit to establish 10 bed hospital. Hospital not in operation in 2007

1891 Pinckneyville Community Hospital		101 North Walnut Street		Pinckneyville, IL 62274-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	36	8	28	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	Project #08-019 - discontinue the entire 50 nursing care bed unit
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	36	8	28	Board to reduce 8 beds. #08-019 in progress for LTC beds

NOTES

Project #08-019 approved on 07/02/2008, received a permit to discontinue the 50 nursing care bed unit. Completion date is 9/12/08

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1925 Proctor Hospital		5409 N. Knoxville Avenue		Peoria, IL 61614-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	214	63	151	
PEDIATRIC	10	2	8	
OBSTETRIC-GYNECOLOGY	29	14	15	
INTENSIVE CARE	16	0	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	30	0	30	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	299	79	220	Board to reduce 79 beds

NOTES

4861 Provena Covenant Medical Center		1400 West Park Avenue		Urbana, IL 61801-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	128	18	110	
PEDIATRIC	18	12	6	
OBSTETRIC-GYNECOLOGY	24	0	24	
INTENSIVE CARE	18	3	15	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	40	10	30	
REHABILITATION	26	1	25	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	254	44	210	Board to reduce 44 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4903 Provena Mercy Medical Center 1325 North Highland Avenue Aurora, IL 60506-1458

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	156	0	156	Board to reduce 16 beds
PEDIATRIC	28	12	16	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	16	0	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	99	4	95	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	315	16	299	

NOTES

4887 Provena Saint Joseph Hospital 77 North Airlite Street Elgin, IL 60123-4912

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	99	0	99	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	15	0	15	
INTENSIVE CARE	15	0	15	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	30	0	30	
REHABILITATION	34	0	34	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	193	0	193	

NOTES Project #05-001/ on 9/22/05- completion date - 4/30/2010 - Construct a 4-story addition with basement to house a new 102 private Med/Surg bed unit, discontinuation of 45 Med/Surg beds.add 2 ICU beds, add 3 rehab beds and discontinue 10 pediatric beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4838 Provena Saint Joseph Medical Center 333 North Madison Street Joliet, IL 60435-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	319	0	319	Bed Change approved on 7/11/2008 - added 5 OB(28 to 33) to an existing
PEDIATRIC	13	0	13	
OBSTETRIC-GYNECOLOGY	33	0	33	
INTENSIVE CARE	52	0	52	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	31	0	31	
REHABILITATION	32	0	32	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	480	0	480	No Change in Authorized Beds

NOTES Project #04-094 approved on 5/3/2005 to discontinue 2 M/S beds now 319, Peds from 16 to 13 beds and AMI beds from 70 to 31 beds; increase 11 ICU beds total is now 52 and Rehab beds from 28 to 32. Project completion date is 12/31/2010.

Bed Change approved on 7/11/2008 Provena St. Joseph Medical Center, Joliet, added 5 Obstetrics beds to an existing category of service effective July 11, 2008. Facility now has 33 Obstetrics beds.

4879 Provena Saint Mary's Hospital 500 West Court Street Kankakee, IL 60901-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	105	0	105	Board to reduce 4 beds
PEDIATRIC	14	0	14	
OBSTETRIC-GYNECOLOGY	12	0	12	
INTENSIVE CARE	30	4	26	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	25	0	25	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	186	4	182	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4853 Provena United Samaritans Medical Center 812 North Logan Street Danville, IL 61832-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	158	24	134	Board to reduce 36 beds
PEDIATRIC	18	9	9	
OBSTETRIC-GYNECOLOGY	19	2	17	
INTENSIVE CARE	15	1	14	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	210	36	174	

NOTES

4549 Provident Hospital of Cook County 500 East 51st Street Chicago, IL 60615-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	173	92	81	Board to reduce 107 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	31	8	23	
INTENSIVE CARE	18	7	11	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	222	107	115	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5199 Red Bud Regional Hospital		325 Spring Street		Red Bud, IL 62278-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	26	1	25	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	31	1	30	Board to reduce 1 beds

NOTES

9038 Regency Hospital of Rockford		1390 N. Mulford Road		Rockford, IL 61107
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	44	0	44	
TOTAL BEDS	44	0	44	#06-038, Board approved the permit for new 44 LTACH hospital.

NOTES

#06-038, Board approved the permit for new 44 LTACH hospital. Hospital not in operation in 2007

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1958 Rehabilitation Institute of Chicago		345 East Superior Street		Chicago, IL 60611-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	165	0	0	
LONG-TERM CARE	0	0	165	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	165	0	165	

NOTES

1974 Resurrection Medical Center		7435 West Talcott Avenue		Chicago, IL 60631-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	214	0	214	Project #07-093 - Discontinue its 104 beds. M/S= 214
PEDIATRIC	17	0	17	
OBSTETRIC-GYNECOLOGY	23	0	23	
INTENSIVE CARE	41	0	41	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	65	0	65	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	360	0	360	

NOTES Project #07-093 / on 10/23/07- completion date - 9/1/2011- Construct a five story addition to an existing facility for patient services. Add 11 ICU beds and discontinue 104 M/S beds.
On 9/1/2007 due to a Bed Change per 10 bed rule, hospital added 4 beds to existing 61-bed Rehabilitation unit. Facility now authorized for 64 Rehabilitation beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4788

Richland Memorial Hospital

800 East Locust

Olney, IL 62450-2598

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	61	0	61	
PEDIATRIC	5	0	5	
OBSTETRIC-GYNECOLOGY	11	0	11	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	16	0	16	
REHABILITATION	0	0	0	
LONG-TERM CARE	34	0	34	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	135	0	135	

NOTES

5124

Riveredge Hospital

8311 West Roosevelt Road

Forest Park, IL 60130-2500

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	210	0	210	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	210	0	210	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2014 Riverside Medical Center		350 North Wall Street		Kankakee, IL 60901-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	175	13	162	project 08-087, decrease of 13 M/s beds
PEDIATRIC	24	0	24	
OBSTETRIC-GYNECOLOGY	30	0	30	project 08-087, increase of 8 ICU beds
INTENSIVE CARE	40	0	40	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	50	0	50	
REHABILITATION	24	5	19	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	343	18	325	Board to reduce 18 beds

NOTES

On 4/22/09, Board approved project #08-087, according to this, there is a decrease of 13 M/S beds and increase of 8 ICU beds. M/s= 162, ICU=40. Total beds = 325

4804 RML Health Providers, L.P.		5601 S. County Line Road		, IL 60521-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	174	59	115	Board reclassified the beds under LTAC per PART 1100 effective 2/6/09
TOTAL BEDS	174	59	115	Board reclassified the beds under LTAC per PART 1100

NOTES

On 4/22/09, Board approved the reclassification of the beds under LTAC per PART 1100

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2022 Rochelle Community Hospital		900 North 2nd Street		Rochelle, IL 61068-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	50	29	21	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	54	29	25	Board to reduce 29 beds

NOTES

On 4/22/09, Board approved project #08-087, according to this, there is a decrease of 13 M/S beds and increase of 8 ICU beds. M/s= 162, ICU=40. Total beds = 325

2048 Rockford Memorial Hospital		2400 North Rockton Avenue		Rockford, IL 61103-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	231	0	231	
PEDIATRIC	35	0	35	
OBSTETRIC-GYNECOLOGY	35	0	35	
INTENSIVE CARE	31	2	29	
NEONATAL INTENSIVE CARE	44	0	44	
ACUTE/CHRONIC MENTAL ILLNES	20	0	20	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	396	2	394	Board to reduce 2 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2063 Roseland Community Hospital 45 West 111th Street Chicago, IL 60628-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	132	55	77	#08-055 - Establish 30 AMI category of service
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	20	3	17	
INTENSIVE CARE	10	0	10	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	30	0	30	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	192	58	134	
				Board to reduce 58 beds

NOTES

#08-055 approved Jan 2009 to establish 30 bed AMI category of service.

2188 Rush North Shore Medical Center 9600 Gross Point Road Skokie, IL 60076-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	173	0	173	Project #08-044 - discontinue its entire 19-beds
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	51	9	42	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	246	9	237	
				Board to reduce 9 beds in AMI

NOTES

Project #08-044 approved on 9/17/2008, and completed on 9/17/08; Was permitted to discontinue its 19-bed Obstetrics category of service.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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1750 Rush Oak Park Hospital		520 South Maple Street		Oak Park, IL 60304-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	187	27	160	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	14	0	14	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	37	1	36	
LONG-TERM CARE	36	0	36	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	274	28	246	Board to reduce 28 beds

NOTES

1917 Rush University Medical Center		1653 West Congress Parkway		Chicago, IL 60612-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	340	0	340	Project# 07-125 - Discontinue 128 M/S beds. Current M/S = 340
PEDIATRIC	70	42	28	
OBSTETRIC-GYNECOLOGY	44	6	38	
INTENSIVE CARE	132	0	132	Project# 07-125 - add 37 ICU beds. ICU = 132
NEONATAL INTENSIVE CARE	72	0	72	Project# 07-125 - add 15 NICU beds. NICU= 72
ACUTE/CHRONIC MENTAL ILLNES	101	11	90	
REHABILITATION	66	0	66	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	825	59	766	Board to reduce 59 beds

NOTES

On 1/15/2008 Project# 07-125 approved to discontinue 128 M/S beds and add 37 ICU beds and 15 NICU beds to existing category of service. Facility is now authorized for 340 Medical-Surgical beds, 72 NICU and 132 ICU beds. Completion date 1/29/2014.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4671 Rush-Copley Medical Center 2000 Ogden Avenue Aurora, IL 60504-4206

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	116	0	116	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	12	0	12	
NEONATAL INTENSIVE CARE	9	0	9	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	18	0	18	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	183	0	183	

NOTES Project #06-003/ on 4/25/06 - Completion Date - 10/31/02010- New construction; add 26 M/S beds

4168 Sacred Heart Hospital 3240 West Franklin Blvd Chicago, IL 60624-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	111	0	111	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	119	0	119	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2360 Saint Elizabeth Hospital		1431 North Claremont Avenue		Chicago, Illinois 60622
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	40	0	40	Project # 05-034 - reduce Med/Surg from 134 to 40 beds.
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	Project # 05-034 - discontinue entire 12-bed ICU unit
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	40	0	0	
REHABILITATION	0	0	40	Project # 05-034 - reduce the AMI beds from 72 to 40
LONG-TERM CARE	28	0	0	
LONG-TERM ACUTE CARE	0	0	28	
TOTAL BEDS	108	0	0	No change in Authorized Beds
		0	108	

NOTES Project # 05-034 on 11/1/05 - Completion 6/30/09 - Discontinue the 19-bed Peds unit, the 11-bed OB unit, the 12-bed ICU unit and the cardiac cath service, reduce Med/Surg from 134 to 40 beds and AMI from 72 to 40.

2253 Saint Anthony Medical Center		5666 East State Street		Rockford, IL 61108-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	190	0	190	
PEDIATRIC	13	0	13	
OBSTETRIC-GYNECOLOGY	13	0	13	
INTENSIVE CARE	38	0	13	
NEONATAL INTENSIVE CARE	0	0	38	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	254	0	0	
		0	254	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2287 Saint Anthony's Hospital		Saint Anthony's Way		Alton, IL 62002-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	94	0	94	project # 07-144 received approval for reduction of 17 M/S
PEDIATRIC	5	0	5	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	19	0	19	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	138	0	138	
				No Change in Authorized Bed Count is needed - #07-144 in place

NOTES

On 4/8/2008, project # 07-144 received approval for reduction of 17 M/S and 15 Ped beds. Medical-Surgical beds from 111 to 94 and Peds from 20 to 5 beds. Project completion date 9/1/2011

4218 Saint Clare's Hospital		915 East Fifth Street		Alton, IL 62002-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	under 10% rule approved for 3 rehab beds in 4/08
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	24	0	24	
LONG-TERM CARE	38	8	30	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	62	8	54	
				Board to reduce 8 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2493 Saint Joseph Hospital **2900 North Lake Shore Drive** **Chicago, IL 60657-0000**

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	242	23	219	Board to reduce 42 beds
PEDIATRIC	16	5	11	
OBSTETRIC-GYNECOLOGY	23	0	23	
INTENSIVE CARE	37	14	23	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	35	0	35	
REHABILITATION	23	0	23	
LONG-TERM CARE	26	0	26	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	402	42	360	

NOTES

2584 Saint Mary Of Nazareth Hospital **2233 West Divison Street** **Chicago, IL 60622-0000**

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	186	0	186	
PEDIATRIC	14	0	14	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	32	0	32	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	120	0	120	
REHABILITATION	15	0	15	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	387	0	387	

NOTES Project 05-035 apprvd 11/1/05. Compltn 12/31/09 Major modernization including reducing Med/Surg from 223 to 186, reduce Peds from 30 to 14, increase OB from 15 to 20, increase ICU from 23 to 32, reduce Rehab from 18 to 15 and increase AMI from 78 to 120.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2089 Salem Township Hospital		1201 Ricker Drive		Salem, IL 62881-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	43	21	22	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	3	0	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	46	21	25	Board to reduce 21 beds

NOTES

3392 Sara Bush Lincoln Health Center		1000 Health Center Drive		Mattoon, IL 61938-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	114	41	73	
PEDIATRIC	10	2	8	
OBSTETRIC-GYNECOLOGY	20	1	19	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	20	0	20	
REHABILITATION	0	0	0	
LONG-TERM CARE	15	0	15	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	187	44	143	Board to reduce 44 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2105

Sarah Culbertson Memorial Hospital

238 South Congress Street

Rushville, IL 62681-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	22	0	22	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	30	1	29	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	52	1	51	
				Board to reduce 1 bed

NOTES

2147

Schwab Rehabilitation Center

1401 South California Avenue

Chicago, IL 60608-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	95	14	81	
LONG-TERM CARE	30	9	21	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	125	23	102	
				Board to reduce 23 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2154 Shelby Memorial Hospital		200 South Cedar Street		Shelbyville, IL 62565-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	30	0	30	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	30	0	30	

NOTES

2162 Sherman Hospital		Replacement		Elgin, IL 60120-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	189	0	189	Project #05-054/ - Medical-Surgical beds reduced by 104. Current M/S = Project #05-054/ - reduce pediatric beds from 10 to 8. Project #05-054/ - increase of OB beds from 4 to 28 Project #05-054/ increase in Intensive care beds from 2 to 30.
PEDIATRIC	8	0	8	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	30	0	30	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	255	0	255	No change in Beds needed

NOTES Project #05-054/ on 6/7/06- completion date - 6/30/2010 - Discontinue 363 bed Acute Care Hospital and Establish a new 255 bed acute care facility. The new facility will have 189 M/S, 8 Pediatric, 28 OB and 30 ICU beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3152

Shriners Hospitals for Children - Chicago

2211 North Oak Park Avenue

Chicago, IL 60707-3392

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	60	0	60	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	60	0	60	

NOTES This hospital's bed numbers are shown for informational purposes only. Per the HFPB rules, this facility is currently classified as a "Specialized Long Term Care, Long-Term Medical Care for Children."

2170

Silver Cross Hospital

1New lenox

Joliet, IL 60432-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	194	0	194	Project #07-148 - add 10 additional Medical-Surgical beds. Now M/S is 194
PEDIATRIC	8	0	8	Project #07-148 reduce 31 pediatric beds. Now Peds is 39 to 8 beds
OBSTETRIC-GYNECOLOGY	30	0	30	Project #07-148 - add 4 OB-Gyn beds. Now OB beds increased from 26 to
INTENSIVE CARE	22	0	22	Project #07-148 - add 4 ICU beds. Now ICU beds increased from 18 to 22
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	20	4	16	
REHABILITATION	15	0	15	Project #07-148 - reduce 2 rehabilitation beds. Now Rehab move 17 to 15
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	289	4	285	Board to reduce 4 beds - Replacement hospital at New Lenox is proposed

NOTES Project #07-148 approved on 7/1/2008 received permit to discontinue entire existing hospital and to construct a replacement hospital in New Lenox. Project completion date is 3/30/2012.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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21709 Silver Cross Hospital		1200 Maple Street		Joliet, IL 60432-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	Project #07-148 - add 10 additional Medical-Surgical beds. Now M/S is 194
PEDIATRIC	0	0	0	Project #07-148 reduce 31 pediatric beds. Now Peds is 39 to 8 beds
OBSTETRIC-GYNECOLOGY	0	0	0	Project #07-148 - add 4 OB-Gyn beds. Now OB beds increased from 26 to
INTENSIVE CARE	0	0	0	Project #07-148 - add 4 ICU beds. Now ICU beds increased from 18 to 22
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	Project #07-148 - reduce 2 rehabilitation beds. Now Rehab move 17 to 15
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	0	0	0	Board to reduce 4 beds - #07-148 in place

NOTES

Project #07-148 approved on 7/1/2008 received permit to discontinue entire existing hospital and to construct a replacement hospital in New Lenox. Project completion date is 3/30/2012.

3459 South Shore Hospital		8012 South Crandon		Chicago, IL 60617-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	152	35	117	
PEDIATRIC	6	0	6	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	166	35	131	Board to reduce 35 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2220 Sparta Community Hospital		818 East Broadway Street		Sparta, IL 62286-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	31	7	24	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	6	2	4	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	39	9	30	Board to reduce 9 beds

NOTES

8167 Springfield Behavioral Health Center		5230 S. Sixth Street		Springfield, IL 62703
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	80	0	80	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	80	0	80	#06-085, Establish an 80 bed Psychiatric Hospital.

NOTES

#06-085, Establish an 80 bed Psychiatric Hospital. Hospital not in operation in 2007.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2279 St Anthony's Memorial Hospital		503 North Maple Street		Effingham, IL 62401-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	100	0	100	
PEDIATRIC	6	0	6	
OBSTETRIC-GYNECOLOGY	17	0	17	
INTENSIVE CARE	10	0	10	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	13	0	13	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	146	0	146	

NOTES

4994 St. Alexius Medical Center		1555 N. Barrington Road		Hoffman Estates, IL 60194-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	239	0	239	
PEDIATRIC	35	0	35	
OBSTETRIC-GYNECOLOGY	28	0	28	
INTENSIVE CARE	29	0	29	
NEONATAL INTENSIVE CARE	8	0	8	Project #07-146 - establish an 8-station Neonatal Intensive Care service
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	339	0	339	No reduction in beds needed - #07-146 in place

NOTES

Project #07-146 approved on 4/8/2008, St. Alexius Medical Center, Hoffman Estates, received permit to establish an 8-station Neonatal Intensive Care service. Project completion date is 10/31/2009

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4556 St. Anthony Hospital		2875 West 19th Street		Chicago, IL 60623-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	77	15	62	
PEDIATRIC	12	0	12	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	15	0	15	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	42	0	42	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	166	15	151	Board to reduce 15 beds

NOTES

2303 St. Bernard Hospital		326 West 64th Street		Chicago, IL 60621-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	110	0	110	
PEDIATRIC	28	0	28	
OBSTETRIC-GYNECOLOGY	22	0	22	
INTENSIVE CARE	10	0	10	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	40	0	40	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	210	0	210	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

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2345 St. Elizabeth Hospital		211 South 3rd Street		Belleville, IL 62221-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	358	80	278	
PEDIATRIC	14	0	14	
OBSTETRIC-GYNECOLOGY	30	0	30	
INTENSIVE CARE	24	0	24	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	47	0	47	
REHABILITATION	33	0	33	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	506	80	426	Board to reduce 80 beds

NOTES

2386 St. Francis Hospital		1215 Franciscan Drive		Litchfield, IL 62056-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	18	0	18	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	3	0	3	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	11	0	11	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	36	0	36	

NOTES On 3/27/2007, Project # 06-084 received permission to reduce existing Medical-Surgical category of service from 126 to 18 beds, existing ICU beds from 6 to 4 and reduce existing Obstetrics service from 14 to 3 beds. Completion date is 3/27/08.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2402 St. Francis Hospital		355 Ridge Avenue		Evanston, IL 60202-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	290	84	206	
PEDIATRIC	20	8	12	
OBSTETRIC-GYNECOLOGY	19	1	18	
INTENSIVE CARE	46	11	35	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	375	104	271	Board to reduce 104 beds

NOTES

5116 St. Francis Hospital & Heath Ctr		12935 South Gregory Street		Blue Island, IL 60406-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	319	0	319	
PEDIATRIC	33	27	6	
OBSTETRIC-GYNECOLOGY	30	0	30	Based upon communication with current ownership, they prefer not to
INTENSIVE CARE	28	0	28	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	410	27	383	Board to reduce 27 beds

NOTES

Based upon communication with current ownership, they prefer not to reduce 9 OB beds and data provided as of current conditions and not as of 12/31/07

Project #08-041- change of Ownership and Name change from St.Francis Medical Center to Metro South Medical Center.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5074 St. James Hospital & Health Center 20201 South Crawford Olympia Fields, IL 60461-1010

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	139	0	139	Project #08-035 - received a permit to add 21 M/S beds. Current M/S=139 Project #08-035 - discontinue an entire 18-bed Pediatrics unit Project #08-035 - discontinue entire 9-bed Obstetrics category of service
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	26	1	25	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	165	1	164	Board to reduce 1 bed - #08-035 in place

NOTES On 2/22/2007, Reinstated project # 01-031, involves discontinuation of 9 Peds (27 to 18), 10 AMI (28 to 18), 7 Rehab and add 10 ICU beds (16 to 26). Project #02-015 approved on 6/11/03 and # 03-008 on 2/17/03 discontinues Rehab & AMI units totally.

Project #08-035, approved on 9/17/2008, St. James Hospital & Health Center, Olympia Fields, received a permit to add 21 Medical-Surgical beds and to discontinue an 18-bed Pediatrics unit and a 9-bed Obstetrics category of service.

2436 St. James Hospital & Health Center 1423 Chicago Road Chicago Heights, IL 60411-3483

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	313	83	230	
PEDIATRIC	10	0	10	
OBSTETRIC-GYNECOLOGY	24	2	22	
INTENSIVE CARE	20	0	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	30	0	30	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	397	85	312	Board to reduce 85 beds

NOTES On 6/12/2007, Project #07-008 received permit to add 10 Rehabilitation beds to existing category of service. Rehabilitation bed total now 30. Completion date is 7/31/08

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2451 St. John's Hospital		800 East Carpenter		Springfield, IL 62769-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	457	149	308	
PEDIATRIC	32	0	32	
OBSTETRIC-GYNECOLOGY	38	0	38	
INTENSIVE CARE	44	0	44	
NEONATAL INTENSIVE CARE	40	0	40	
ACUTE/CHRONIC MENTAL ILLNES	49	9	40	
REHABILITATION	0	0	0	
LONG-TERM CARE	78	41	37	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	738	199	539	Board to reduce 199 beds

NOTES

2535 St. Joseph Medical Center		2200 East Washington		Bloomington, IL 61701-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	95	0	95	
PEDIATRIC	18	2	16	
OBSTETRIC-GYNECOLOGY	18	0	18	
INTENSIVE CARE	14	0	14	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	12	0	12	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	157	2	155	Board to reduce 2 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4614 St. Joseph Memorial Hospital		2 South Hospital Drive		Murphysboro, IL
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	47	9	38	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	49	9	40	Board to reduce 9 beds

NOTES

2543 St. Josephs Hospital		1515 Main Street		Highland, IL 62249-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	66	45	21	
PEDIATRIC	4	2	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	6	2	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	30	0	30	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	106	49	57	Board to reduce 49 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2527 St. Josephs Hospital, Breese 9515 Holy Cross Lane Breese, IL 62230-0099

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	69	0	69	
PEDIATRIC	6	0	6	
OBSTETRIC-GYNECOLOGY	6	0	6	
INTENSIVE CARE	4	0	4	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	85	0	85	

NOTES

2576 St. Margaret's Hospital 600 East First Street Spring Valley, IL 61362-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	48	1	47	Project #08-018 with reduction of 70 Med-Surg, now the total is 48
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	6	0	6	Project #08-018 with reduction of 9 OB beds , now the total is 6
INTENSIVE CARE	6	0	6	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	Project #08-018 with reduction of 33 LTC beds, a total discontinuation of
TOTAL BEDS	60	1	59	Board to reduce 1 bed - #08-018 in place

NOTES

Project #08-018, approved on 8/12/2008 received a permit to establish a replacement hospital. Resulted in reduction of 70 M/S beds, 16 peds, 9 OB and 33 LTC; The hospital will have 48 M/S, 6 ICU, 6 OB, and 0 Peds. Completion date is stated as 4/30/2011.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2675 St. Mary Medical Center		3333 North Seminary		Galesburg, IL 61401-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	95	17	78	
PEDIATRIC	10	5	5	
OBSTETRIC-GYNECOLOGY	23	16	7	
INTENSIVE CARE	10	1	9	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	138	39	99	Board to reduce 39 beds

NOTES

2642 St. Mary's Hospital		400 North Pleasant Avenue		Centralia, IL 62801-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	144	22	122	
PEDIATRIC	23	5	18	
OBSTETRIC-GYNECOLOGY	16	0	16	
INTENSIVE CARE	13	1	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	37	25	12	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	233	53	180	Board to reduce 53 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2592 St. Mary's Hospital		1800 East Lake Shore		Decatur, IL
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	202	0	202	
PEDIATRIC	20	0	20	
OBSTETRIC-GYNECOLOGY	24	0	24	
INTENSIVE CARE	19	0	19	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	56	0	56	
REHABILITATION	20	0	20	
LONG-TERM CARE	24	0	24	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	365	0	365	

NOTES Project #06-078/ on 6/12/07- completion date - 6/30/08 - Discontinue 36 skilled nursing beds and establish a 20 bed rehabilitation category of service

2659 St. Mary's Hospital		111 Spring Street		Streator, IL 61364-3399
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	162	81	81	
PEDIATRIC	15	8	7	
OBSTETRIC-GYNECOLOGY	30	23	7	
INTENSIVE CARE	14	6	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	30	0	30	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	251	118	133	Board to reduce 118 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4762

Streamwood Behavioral Health Systems

1400 E. Irving Park Road

Streamwood, IL 60107-320

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	Project #06-074 - add 42 AMI beds for a total of 162 AMI Beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	162	0	0	
REHABILITATION	0	0	162	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	162	0	162	No Board action required - #06-074 in place

NOTES Project #06-074 approved on 5/1/07 - Completion date - 5/1/09 - Construct an addition to a existing facility and add 42 AMI beds for a total of 162 AMI Beds.

2725

Swedish American Hospital

1401 East State Street

Rockford, IL 61104-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	209	0	209	Bed Change approved on 7/31/2008 - add 10 M/SI beds for a total of 209
PEDIATRIC	28	0	28	
OBSTETRIC-GYNECOLOGY	34	0	34	
INTENSIVE CARE	30	0	30	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	66	34	32	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	367	34	333	Board to reduce 34 beds off AMI

NOTES Bed Change approved on 7/31/2008, the facility received permission to add 10 Medical-Surgical beds on May 20, 2008. Beds became operational July 31, 2008. Facility now has 209 M/S beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2717 Swedish Covenant Hospital 5145 North California Avenue Chicago, IL 60625-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	182	0	182	
PEDIATRIC	6	0	6	
OBSTETRIC-GYNECOLOGY	21	0	21	
INTENSIVE CARE	18	0	18	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	36	2	34	
REHABILITATION	25	0	25	
LONG-TERM CARE	46	9	37	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	334	11	323	
				Board to reduce 11 beds

NOTES

2691 Taylorville Memorial Hospital 201 East Pleasant Street Taylorville, IL 62568-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	93	72	21	Project #08-048 discontinue its entire 5-bed Obstetrics category of service.
PEDIATRIC	20	19	1	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	11	8	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	50	28	22	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	174	127	47	
				Board to reduce 127 beds - #08-048 in place

NOTES

Project #08-048, approved on 9/17/2008 Taylorville Memorial Hospital, Taylorville, received a permit to discontinue its 5-bed Obstetrics category of service. Completion date is 9/17/08.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4689

The Pavilion Foundation

809 West Church Street

Champaign, IL 61820-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	47	0	0	
REHABILITATION	0	0	47	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	47	0	47	

NOTES

2782

Thomas H. Boyd Memorial Hospital

800 School Street

Carrollton, IL 62016-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	20	7	13	
PEDIATRIC	2	0	2	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	Project # 07-132/ discontinue entire LTC unit
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	22	7	15	Board to reduce 7 beds - #07-132 in place

NOTES Project # 07-132/ on 12/4/07- completion date - 12/31/07 - Discontinue 40 bed skilled nursing category of service.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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0067 Thorek Memorial Hospital

850 West Irving Park

Chicago, IL 60613-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	187	57	130	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	11	0	11	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	20	0	20	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	218	57	161	
				Board to reduce 57 beds

NOTES Project# 04-091/on 6/23/05- completion date - 4/1/07 - Establish a 20-bed AML unit in modernized space and discontinue 20 Med/Surg beds.

4523 Touchette Regional Hospital

5900 Bond Avenue

Centreville, IL 62207-0000

		BOARD CONSIDERATION		COMMENTS
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	66	0	66	Projec#07-105- addition of 4 (4 to 8) ICU beds
PEDIATRIC	8	0	8	
OBSTETRIC-GYNECOLOGY	33	0	33	
INTENSIVE CARE	8	0	8	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	115	0	115	
				No Board action required - #07-105 in place

NOTES Projec#07-105 approved on 4/8/2008 , received permit for the addition of 4 ICU beds at Touchette; and the discontinuation of 115 M/S, 7 Peds, and 8 ICU services at Kenneth Hall. Project completion date is 7/11/08

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5140 Trinity Medical Center - 7th Street Campus		500 John Deere Road		Moline, IL 61265
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	20	0	20	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	18	0	18	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	38	0	38	

NOTES

3244 Trinity Medical Center - West		2701 17th Street		Rock Island, IL 61201-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	193	0	193	
PEDIATRIC	9	0	9	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	31	11	20	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	54	0	54	
REHABILITATION	22	0	22	
LONG-TERM CARE	29	0	29	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	338	11	327	Board to reduce 11 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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5025 UHS Hartgrove Hospital		5730 W. Roosevelt Road		Chicago, IL 60644
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	136	0	0	
REHABILITATION	0	0	136	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	136	0	136	

NOTES

2824 Union County Hospital District		517 North Main Street		Anna, IL 62906-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	36	11	25	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	22	0	22	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	58	11	47	Board to reduce 11 beds

NOTES On 11/1/2006, resulted in name change for long term facility and 22 General Nursing care beds included under Hospital License. Facility now has 22 LTC beds.

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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3897

University Of Chicago Medical Center

5841 South Maryland

Chicago, IL 60637-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	300	0	300	Project #07-153 reduce M/S beds by 27 (now M/S- 300 beds)
PEDIATRIC	64	3	61	
OBSTETRIC-GYNECOLOGY	50	4	46	
INTENSIVE CARE	114	0	114	Project #07-153 increase ICU beds by 22 (now ICU - 114 beds)
NEONATAL INTENSIVE CARE	47	0	47	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	Project# 07-141discontinue entire 16-bed AMI category of service
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	575	7	568	Board to reduce 7 beds. #07-153 & 07-141 in place

NOTES On 1/15/2008, Project# 07-141, received permit to discontinue entire 16-bed Acute Mental Illness category of service. Completion date is 3/31/08
On 5/20/2008, project #07-153 is issued for construction of patient tower;reduce M/S beds by 27 (now M/S- 300 beds) and increase ICU beds by 22 (now ICU - 114 beds). Completion date 12/31/2016.

2840

University of Illinois Medical Center @ Chicago

1740 West Taylor Street

Chicago, IL 60612-0000

		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	248	8	240	
PEDIATRIC	44	0	44	
OBSTETRIC-GYNECOLOGY	45	0	45	
INTENSIVE CARE	65	0	65	
NEONATAL INTENSIVE CARE	26	0	26	
ACUTE/CHRONIC MENTAL ILLNES	61	8	53	
REHABILITATION	18	0	18	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	507	16	491	
				Board to reduce 16 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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4690 Valley West Community Hospital		11 East Pleasant Avenue		Sandwich, IL 60548-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	66	48	18	
PEDIATRIC	4	0	4	
OBSTETRIC-GYNECOLOGY	6	0	6	
INTENSIVE CARE	4	1	3	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	80	49	31	Board to reduce 49 beds

NOTES

5215 Van Matre Healthsouth Rehabilitation Hospital		950 South Mulford Road		Rockford, IL 61108-0730
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	50	0	50	Project #07-155 - add 10 Rehabilitation beds. Beds increased from 40 to 50
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	50	0	50	No Board action required - #07-155 in place

NOTES

Project #07-155, approved on 5/20/2008 Van Matre Rehabilitation Center, Rockford, received permit to add 10 Comprehensive Physical Rehabilitation beds to existing facility. The facility is now authorized for 50 Rehab beds. Project Completion date 12/31/09

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2857 Vista Medical Center East		1324 North Sheridan Road		Waukegan, IL 60085-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	256	0	256	
PEDIATRIC	35	0	35	
OBSTETRIC-GYNECOLOGY	29	0	29	
INTENSIVE CARE	16	0	16	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	336	0	336	

NOTES

4895 Vista Medical Center West		2615 West Washington		Waukegan, IL 60085-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	0	0	0	
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	46	0	46	
REHABILITATION	25	0	25	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	71	0	71	

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2865 Wabash General Hospital District 1418 College Drive Mount Carmel, IL 62863-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	56	31	25	Board to reduce 31 beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	56	31	25	

NOTES

2899 Washington County Hospital 705 South Grand Avenue Nashville, IL 62263-0000

CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	BOARD CONSIDERATION		COMMENTS
		REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	
MEDICAL-SURGICAL	22	0	22	#08-072 - Board reduced 3 OB beds
PEDIATRIC	0	0	0	
OBSTETRIC-GYNECOLOGY	0	0	0	
INTENSIVE CARE	0	0	0	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	33	0	33	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	55	0	55	

NOTES

Project #08-072 approved on Jan 2009, discontinue 3 bed OB service

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development

AUTHORIZED BEDS - BED ADJUSTMENTS BASED UPON 2007 ABR

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2907 West Suburban Hospital		Erie At Austin		Oak Park, IL 60302-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	135	0	135	
PEDIATRIC	29	24	5	
OBSTETRIC-GYNECOLOGY	20	0	20	
INTENSIVE CARE	24	0	24	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	0	0	0	
REHABILITATION	0	0	0	
LONG-TERM CARE	79	29	50	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	287	53	234	Board to reduce 53 beds

NOTES

2915 Westlake Community Hospital		1225 Lake Street		Melrose Park, IL 60160-0000
		BOARD CONSIDERATION		
CATEGORY OF SERVICE	AUTHORIZED BEDS APRIL 2009	REDUCTION IN BEDS	AUTHORIZED BEDS (NEW)	COMMENTS
MEDICAL-SURGICAL	158	47	111	
PEDIATRIC	5	0	5	
OBSTETRIC-GYNECOLOGY	24	0	24	
INTENSIVE CARE	20	8	12	
NEONATAL INTENSIVE CARE	0	0	0	
ACUTE/CHRONIC MENTAL ILLNES	35	2	33	
REHABILITATION	40	0	40	
LONG-TERM CARE	0	0	0	
LONG-TERM ACUTE CARE	0	0	0	
TOTAL BEDS	282	57	225	Board to reduce 57 beds

NOTES

NOTE: "Authorized Beds (New)" numbers are approved by HFPB on 4/22/09.

Where a facility has an approved CON permit for a change in bed count, the "Authorized Bed (New)" numbers are based upon date of project completion.

Source: 2008 Annual Hospital Bed Report, Illinois Department of Public Health, Health Systems Development